

ISSUE SLIP STAMP AREA (for additional cross references)

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION	UT	69607	6/23/00
O.I.P.E. CLASSIFIER		23	6/29/99
FORMALITY REVIEW	RR	70029	7/8/99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	Original
1	11/19/01
2	5/24/02
3	11/30/03
4	11/30/04
5	11/30/04
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

11 SET INSIDE